OMB Number: 4040-0004 Expiration Date: 12/31/2019

| Application for | r Federal Assista | ince SF-424 | | |
|---|----------------------------|----------------------------|--|-----|
| * 1. Type of Submis Preapplication Application Changed/Cor | | New | * If Revision, select appropriate letter(s): * Other (Specify): | |
| * 3. Date Received: 06/22/2018 | | 4. Applicant Identifier: | | |
| 5a. Federal Entity lo | dentifier: | | 5b. Federal Award Identifier: | |
| State Use Only: | | | | |
| | State | 7 State Application | Identifies | |
| 6. Date Received b | | 7. State Application | Identilier: | |
| 8. APPLICANT IN | FORMATION: | | | |
| * a. Legal Name: | Florida Fish & | Wildlife Commission/ | FWRI | |
| | ayer Identification Nu | mber (EIN/TIN): | * c. Organizational DUNS: | |
| 593105845 | | | 6112082240000 | |
| d. Address: | | | | |
| * Street1: | 100 8th Avenu | e Southeast | | |
| Street2: | | | | |
| * City: | Saint Petersb | urg | | |
| County/Parish: | Florida | | | |
| * State: | | | FL: Florida | |
| * Country | | | | |
| * Zip / Postal Code: | 33701-5020 | | USA: UNITED STATES | |
| | | W. | | |
| e. Organizational | | | T | |
| Department Name: | | | Division Name Fish & Wildlife Research Insti | |
| | | | | |
| f. Name and cont | act information of p | erson to be contacted on m | natters involving this application: | |
| Prefix: | | * First Name | e: Ashley | 1 |
| Middle Name: | | V | w == = 1 = = 1 | |
| l ⊑ | oss | | | |
| Suffix: | | | | |
| Title: OMC Manag | ger, Grants Adm | inistrator | | |
| Organizational Affili Fish & Wildli | iation: fe Research Ins | titute | | |
| * Telephone Number | er: 727-502-4783 | 3 | Fax Number: | |
| | .ross@myfwc.com | | | |
| L This Gantey | . 1000cmy 1 we . COM | | | (S) |

| Application for Federal Assistance SF-424 |
|---|
| * 9. Type of Applicant 1: Select Applicant Type: |
| A: State Government |
| Type of Applicant 2: Select Applicant Type: |
| |
| Type of Applicant 3: Select Applicant Type: |
| |
| * Other (specify): |
| |
| * 10. Name of Federal Agency: |
| Environmental Protection Agency |
| 11. Catalog of Federal Domestic Assistance Number: |
| 66.436 |
| CFDA Title: |
| Surveys, Studies, Investigations, Demonstrations, and Training Grants and Cooperative Agreements - |
| Section 104(b)(3) of |
| * 12. Funding Opportunity Number: |
| EPA-R4-SFL-2018-01 |
| * Title: |
| 2018 SOUTH FL INITIATIVE |
| |
| |
| |
| 13. Competition Identification Number: |
| |
| Title |
| |
| |
| |
| 14. Areas Affected by Project (Cities, Counties, States, etc.): |
| Add Attachment Delete Attachment View Attachment |
| Pad Marking Dock Marking View Marking |
| * 15. Descriptive Title of Applicant's Project: |
| Towards developing a strategic approach to evaluating the role of endocrine disruptors on the South Florida marine environment with an analysis of current knowledge, information gaps, & |
| research needs |
| |
| Attach supporting documents as specified in agency instructions. |
| Add Attachments Delete Attachments View Attachments |

| 16. Congressional Districts Of: | | | | |
|--|--|--|--|--|
| * a. Applicant FL-013 |]_ | | * b. Program/Project FL- | 027 |
| Attach an additional list of Program | /Project Congressional Distric | ts if needed. | | |
| | | Add Attachment | Delete Attachment V | Tiew Attachment |
| 17. Proposed Project: | | | | |
| * a. Start Date: 10/01/2018 | | | * b, End Date: 09/ | 30/2020 |
| 18. Estimated Funding (\$): | <u></u> | | | - |
| * a. Federal | 83,995.00 | | | |
| * b. Applicant | . 25,730.00 | | | |
| * c. State | 0.00 | | % | |
| * d. Local | 0.00 | | | |
| * e. Other | 0.00 | | | |
| * f. Program Income | 0.00 | | | |
| * g. TOTAL | 109,725.00 | | | |
| b. Program is subject to E.O c. Program is not covered by 20. Is the Applicant Delinquen Yes No | . 12372 but has not been se | elected by the State for | *** | |
| b. Program is subject to E.O c. Program is not covered by 20. Is the Applicant Delinquen | . 12372 but has not been set E.O. 12372. t On Any Federal Debt? (If | elected by the State for | review. | |
| b. Program is subject to E.O c. Program is not covered by 20. Is the Applicant Delinquen Yes No If "Yes", provide explanation and | . 12372 but has not been set E.O. 12372. t On Any Federal Debt? (If attach | "Yes," provide explan Add Attachment | ation in attachment.) Delete Attachment V | iew Attachment |
| b. Program is subject to E.O c. Program is not covered by 20. Is the Applicant Delinquen Yes No If "Yes", provide explanation and | t On Any Federal Debt? (If attach i certify (1) to the stateme accurate to the best of me if I accept an award. I am administrative penalties. (L. | "Yes," provide explan Add Attachment ants contained in the lay knowledge. I also paware that any false, file. See J.S. Code, Title 218, See | Delete Attachment.) Delete Attachment V Ust of certifications** and (2 provide the required assurate citious, or fraudulent state ction 1001) | that the statements ances** and agree to ments or claims may |
| b. Program is subject to E.O c. Program is not covered by 20. Is the Applicant Delinquen Yes No If "Yes", provide explanation and 21. *By signing this application herein are true, complete and comply with any resulting terms subject me to criminal, civil, or the subject me to criminal, civil | . 12372 but has not been set E.O. 12372. It On Any Federal Debt? (If attach It certify (1) to the statement accurate to the best of meaning it accept an award. I am administrative penalties. (L. | "Yes," provide explan Add Attachment ants contained in the lay knowledge. I also paware that any false, file. See J.S. Code, Title 218, See | Delete Attachment.) Delete Attachment V Ust of certifications** and (2 provide the required assurate citious, or fraudulent state ction 1001) | that the statements ances** and agree to ments or claims may |
| b. Program is subject to E.O c. Program is not covered by 20. Is the Applicant Delinquen Yes No If "Yes", provide explanation and 21. *By signing this application herein are true, complete and comply with any resulting terms subject me to criminal, civil, or the subject me to criminal, civil | t On Any Federal Debt? (If attach I certify (1) to the stateme accurate to the best of me at administrative penalties. (Learning or an internet site | "Yes," provide explan Add Attachment ants contained in the lay knowledge. I also paware that any false, file. See J.S. Code, Title 218, See | Delete Attachment.) Delete Attachment V Ust of certifications** and (2 provide the required assurate citious, or fraudulent state ction 1001) | that the statements ances** and agree to ments or claims may |
| b. Program is subject to E.O c. Program is not covered by 20. Is the Applicant Delinquen Yes No If "Yes", provide explanation and 21. *By signing this application herein are true, complete and comply with any resulting terms subject me to criminal, civil, or the subject me to criminal, civil | t On Any Federal Debt? (If attach I certify (1) to the stateme accurate to the best of me at administrative penalties. (Learning or an internet site | "Yes," provide explant Add Attachment ants contained in the lay knowledge. I also gaware that any false, file. See where you may obtain the lay where you wh | Delete Attachment.) Delete Attachment V Ust of certifications** and (2 provide the required assurate citious, or fraudulent state ction 1001) | that the statements ances** and agree to ments or claims may |
| b. Program is subject to E.O c. Program is not covered by 20. Is the Applicant Delinquen Yes No If "Yes", provide explanation and 21. *By signing this application herein are true, complete and comply with any resulting terms subject me to criminal, civil, or the subject me to criminal, civil, or t | t On Any Federal Debt? (If attach I certify (1) to the stateme accurate to the best of me at administrative penalties. (Learning or an internet site | "Yes," provide explant Add Attachment ants contained in the lay knowledge. I also gaware that any false, file. See where you may obtain the lay where you wh | Delete Attachment.) Delete Attachment V Ust of certifications** and (2 provide the required assurate citious, or fraudulent state ction 1001) | that the statements ances** and agree to ments or claims may |
| b. Program is subject to E.O c. Program is not covered by 20. Is the Applicant Delinquen Yes No If "Yes", provide explanation and 21. *By signing this application herein are true, complete and comply with any resulting terms subject me to criminal, civil, or the list of certifications and assepcific instructions. Authorized Representative: Prefix: Middle Name: | t On Any Federal Debt? (If attach I certify (1) to the stateme accurate to the best of me at administrative penalties. (Learning or an internet site | "Yes," provide explant Add Attachment ants contained in the lay knowledge. I also gaware that any false, file. See where you may obtain the lay where you wh | Delete Attachment.) Delete Attachment V Ust of certifications** and (2 provide the required assurate citious, or fraudulent state ction 1001) | that the statements ances** and agree to ments or claims may |
| b. Program is subject to E.O c. Program is not covered by 20. Is the Applicant Delinquen Yes No If "Yes", provide explanation and 21. *By signing this application herein are true, complete and comply with any resulting terms subject me to criminal, civil, or a subject me to criminal, civil, or subject me to cri | t On Any Federal Debt? (If attach I certify (1) to the stateme accurate to the best of me at administrative penalties. (Learning or an internet site | "Yes," provide explant Add Attachment ants contained in the lay knowledge. I also gaware that any false, file. See where you may obtain the lay where you wh | Delete Attachment.) Delete Attachment V Ust of certifications** and (2 provide the required assurate citious, or fraudulent state ction 1001) | that the statements ances** and agree to ments or claims may |
| b. Program is subject to E.O c. Program is not covered by 20. Is the Applicant Delinquen Yes No If "Yes", provide explanation and 21. *By signing this application herein are true, complete and comply with any resulting terms subject me to criminal, civil, or a subject me to criminal, civil, or subject me to cri | t On Any Federal Debt? (If attach I certify (1) to the stateme accurate to the best of me sif I accept an award. I am administrative penalties. (Usurances, or an internet site | "Yes," provide explant Add Attachment ants contained in the by knowledge. I also gaware that any false, fil.S. Code, Title 218, Sewhere you may obtain to the Name. Gil | Delete Attachment.) Delete Attachment V Ust of certifications** and (2 provide the required assurate citious, or fraudulent state ction 1001) | that the statements ances** and agree to ments or claims may |



BUDGET INFORMATION - Non-Construction Programs

OMB Number: 4040-0006 Expiration Date: 01/31/2019

SECTION A - BUDGET SUMMARY

| | Grant Program Function or | Catalog of Federal Domestic Assistance | Estimated Unol | Estimated Unobligated Funds | | | New or Re | New or Revised Budget | |
|--------------|------------------------------|---|----------------|-----------------------------|---------------|----------------|-----------|-----------------------|--------------|
| | Activity (a) | Number (b) | Federal (c) | Non-Federal (d) | May. | Federal (e) | Non | Non-Federal (f) | Total (g) |
| - | US EPA | 66.436 | w . | • | \$ | 83,995.00 | | 25,730.00 | 109,725.00 |
| 6 | | | | | | | | | |
| က် | | | | | | | | | |
| 4 | (i) | 21 | | | | | | | |
| ເດ່ | Totals | ** | \$ | s[| \$ | 83,995.00 | \$ | 25,730.00 | 109,725.00 |

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SECTION B - BUDGET CATEGORIES

| & Object Class Categories | | GRANT PROGRAM. F | GRANT PROGRAM, FUNCTION OR ACTIVITY | | Total |
|--|--------------|-----------------------------------|-------------------------------------|----------|---------------------------------|
| | (1) | (2) | (3) | (4) | (5) |
| | US EPA | N/A | | | |
| a. Personnel | 35,182.00 | 13,883.00 | S | S | 49,065.00 |
| b. Fringe Benefits | 12,912.00 | 6,744.00 | | | 19,656.00 |
| c. Travel | 12,212.00 | 0.00 | | | 12,212.00 |
| d. Equipment | 0.00 | 0.00 | | | 0.00 |
| e. Supplies | 4,530.00 | 0.00 | | | 4,530.00 |
| f. Contractual | 0.00 | 0.00 | | | 0.00 |
| g. Construction | 00.00 | 0.00 | | | 0.00 |
| h. Other | 2,500.00 | 0.00 | | | 2,500.00 |
| i. Total Direct Charges (sum of 6a-6h) | 67,336.00 | 20,627.00 | | | \$ 87,963.00 |
| j. Indirect Charges | 16,659.00 | 5,103.00 | | | \$ 21,762.00 |
| k. TOTALS (sum of 6i and 6j) | \$ 83,995.00 | \$ 25,730.00 | S | 4 | 109,725.00 |
| 7. Program Income | S | \$ | \$ | | |
| | A | Authorized for Local Reproduction | oduction | Stan | Standard Form 424A (Rev. 7- 97) |

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Prescribed by OMB (Circular A -102) Page 1A

| | | | SECTION C | SECTION C - NON-FEDERAL RESOURCES | URCES | | | | ļ. |
|------------------|--|---------------------|------------|--|---------------|-------------------------------|----------------------|------------|-------------|
| | (a) Grant Program | | | (b) Applicant | | (c) State | (d) Other Sources | 50 | (e)TOTALS |
| ဆ | US EPA | | | \$ 25,730.00 | <u> </u> | | S | • | 25,730.00 |
| o, | | | | | | | | | |
| 10. | | | | | | | | | |
| 11. | | | | | | | | | |
| 12. | 12. TOTAL (sum of lines 8-11) | | | \$ 25,730.00 | S | | \$ | 43 | 25,730.00 |
| | | | SECTION D | - FORECASTED CASH NEEDS | NEEDS | | | | |
| 2 | 43 Endors | Total for 1st Year | | 1st Qua | | 2nd Quarter | 3rd Qua | | 4th Quarter |
| . 1 | 14. Non-Federal | | 25,730.00 | 7.400.00 | | 6.400.00 | A. 400 00 | 8 8 | 18,499.00 |
| 15. | 15. TOTAL (sum of lines 13 and 14) | | 109,725.00 | 2 | - W | 27,900.00 | 2 | 8.09 | 24,029.00 |
| | SECTION E - BUDGET ESTIMATES OF FEDERAL | GET ESTIMAT | TES OF FED | ERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT | FOR BAI | ANCE OF THE P | ROJECT |] | |
| | (a) Grant Program | | | | FUT | FUTURE FUNDING PERIODS | ERIODS (YEARS) | | |
| [| 21. | | | (b)First | (0) | (c) Second | 1 | | (e) Fourth |
| 16. | US EPA | | | | <u>~</u> | | S | <u> </u> | |
| 17. | | i | | | | | | | |
| 18. | | | | | | | | | |
| 19. | | | 88 | | | | | | |
| 20. | 20. TOTAL (sum of lines 16 - 19) | | | 8 | 55 | | - S | S | |
| | | S | SECTION F. | - OTHER BUDGET INFORMATION | MATION | | | | |
| 21. [| 21. Direct Charges: | | | 22. Indirect Charges: | Charges: | Rate on modified total direct | d total direct costs | : - 24.74% | 148 |
| 23. F | 23. Remarks: IDC rate is last approved rate as | of 6/25/2018, Modif | red | total direct cost less equ | equipment and | nd subcontracts. | | | |
| | | | | | | | | | |

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OMB Number: 2030-0020 Expiration Date: 04/30/2021

EPA KEY CONTACTS FORM

Authorized Representative: Original awards and amendments will be sent to this individual for review and acceptance, unless otherwise indicated.

| Name: Prefix: Mr. First Name: Gil | Middle Name: |
|--|---|
| Last Name: McRae | Suffix: |
| Title: Director, FWRI | |
| Complete Address: | |
| Street1: Fish & Wildlife Research Institute | |
| Street2: 100 8th Avenue Southeast | |
| City: Saint Petersburg State: FL: Florida | |
| Zip / Postal Code: 33701-5020 Country: USA: UNITED STATE | S |
| Phone Number: 727-896-8926 Fax Number: | |
| E-rnail Address: ashley.ross@myfwc.com | |
| Payee: Individual authorized to accept payments. | |
| | Middle Name: |
| Last Name: Burns | Suffix: |
| Title: Revenue, Contracts and Grants Manager | |
| Complete Address: | |
| Street1: Bryan Building - Headquarters | |
| Street2: 620 South Meridian Street 1W | |
| City: Tallahassee State: FL: Florida | |
| Zip / Postal Code: 32399 Country: USA: UNITED STATE: | 5 |
| Phone Number: (850) 488-3831 Fax Number: | |
| E-mail Address: Amber.Burns@MyFWC.com | 3 % |
| Administrative Contact: Individual from Sponsored Programs Office to contact concerning rate computation, rebudgeting requests etc). | g administrative matters (i.e., indirect cost |
| Name: Prefix: Ashley | Middle Name: |
| Last Name: Ross | Suffix: |
| Title: OMC Manager, Grants Administrator | |
| Complete Address: | |
| Street1: Fish & Wildlife Research Institute | |
| Street2: 100 8th Avenue Southeast | |
| City: Saint Petersburg State: FL: Florida | |
| Zip / Postal Code: 33701-5020 Country: USA: UNITED STATES | 5 |
| Phone Number: 727-502-4783 Fax Number: | |
| E-mail Address: ashley.ross@myfwc.com | |

EPA Form 5700-54 (Rev 4-02)

EPA KEY CONTACTS FORM

Project Manager: Individual responsible for the technical completion of the proposed work.

| Name: | Prefix: M | First Name: Bob | | Middle Name: | |
|----------|----------------|------------------------|-------------------------|--------------|-----|
| | Last Nam | e: Glazer | | Suffix: | |
| Title: | Researc | n Scientist | | | |
| Complet | e Addre | <u>s:</u> | | | |
| Street | 1: Sou | h Florida Regional Lab | | | |
| Street | 2 : 279 | Overseas Highway 119 | | | 12 |
| City: | Mar | sthon Sta | te: FL: Florida | | |
| Zip / P | ostal Cod | e: 33050 Co | untry: USA: UNITED STAT | `ES | |
| Phone N | <u>umber:</u> | (305) 676-3230 | Fax Number: | | |
| E-mail A | <u>ddress:</u> | Bob.Glazer@MyFWC.com | | | \$1 |

OMB Number: 2030-0020 Expiration Date: 04/30/2021

Preaward Compliance Review Report for All Applicants and Recipients Requesting EPA Financial Assistance

Note: Read Instructions before completing form.

| l. A. | Applican | /Recipient (Name, Address, City, State, Zip Code) | | |
|-------|------------|---|---------------------|--------------|
| | Name: | Fish & Wildlife Research Institute | | |
| | Address: | 100 8th Avenue Southeast | | |
| | City: | Saint Petersburg | | |
| | State: | FL: Florida Zip Code: 33701-5 | 020 | |
| | | 33.01.3 | U, M | |
| В. | DUNS N | 611208224 | | |
| II. | Is the ap | plicant currently receiving EPA Assistance? Yes No | | |
| III. | | vil rights lawsuits and administrative complaints pending against the applicant/recipient that alle | | |
| | race, col | or, national origin, sex, age, or disability. (Do not include employment complaints not covered by | / 40 C.F.R. Parts ! | 5 and 7.) |
| | | | | |
| IV. | List all c | ivil rights lawsuits and administrative complaints decided against the applicant/recipient within t | he last vear that : | liene |
| 10. | discrimi | e actions taken. (Do not include employment complaints not covered by 40 C.F.R. Parts 5 and 7. | ions. Please desc | |
| | correctiv | e actions taken. (Do not include employment complaints not covered by 40 C.F.R. Parts 5 and 7. | | 9 (3) |
| | | | | |
| V. | of the re- | ivil rights compliance reviews of the applicant/recipient conducted by any agency within the last riew and any decisions, orders, or agreements based on the review. Please describe any correcti | | close a copy |
| 13 | (10 011 11 | | | |
| | | | | |
| VI. | Is the ap | olicant requesting EPA assistance for new construction? If no, proceed to VII; if yes, answer (a) | and/or (b) below. | |
| | | Yes No | | |
| a. | | nt is for new construction, will all new facilities or alterations to existing facilities be designed an e to and usable by persons with disabilities? If yes, proceed to VII; if no, proceed to VI(b). | d constructed to | be readily |
| | | Yes No | | |
| b | | nt is for new construction and the new facilities or alterations to existing facilities will not be read ns with disabilities, explain how a regulatory exception (40 C.F.R. 7.70) applies. | dily accessible to | and usable |
| - | | | - 24 | |
| | 111 | | | |
| VII. | | applicant/recipient provide initial and continuing notice that it does not discriminate on the basis olor, national origin, sex, age, or disability in its program or activities? (40 C.F.R 5.140 and 7.95) | | ☐ No |
| a. | Do the m | ethods of notice accommodate those with impaired vision or hearing? | X Yes | ☐ No |
| b | | tice posted in a prominent place in the applicant's offices or facilities or, for education programs ities, in appropriate periodicals and other written communications? | X Yes | ☐ No |
| C. | Does the | notice identify a designated civil rights coordinator? | X Yes | ☐ No |
| VIII. | | applicant/recipient maintain demographic data on the race, color, national origin, sex, age, or of the population it serves? (40 C.F.R. 7.85(a)) | Yes | ⊠ No |
| IX. | | applicant/recipient have a policy/procedure for providing access to services for persons with nglish proficiency? (40 C.F.R. Part 7, E.O. 13166) | X Yes | ☐ No |

| X. If the applicant is an education program or compliance with 40 C.F.R. Parts 5 and 7? I number of the designated coordinator. | activity, or has 15 or more employees, has it designated an Provide the name, title, position, mailing address, e-mail add | employee to coordinate its lress, fax number, and telephone |
|--|---|--|
| Jodi Harner, Personnel Manager I | | # <u>*</u> |
| HR Liaison | | |
| 100 8th Avenue Southeast Saint Petersburg, Florida 33708-5020 | | |
| Jodi.Harner@MyFWC.com | 2 | |
| 727-502-4771 | | |
| XI. If the applicant is an education program or prompt and fair resolution of complaints th for, or a copy of, the procedures. | activity, or has 15 or more employees, has it adopted grieva at allege a violation of 40 C.F.R. Parts 5 and 7? Provide a le | ince procedures that assure the gal citation or Internet Address |
| https://www.dms.myflorida.com/workforce | e_operations/human_resource_management/collectiv | e_bargaining |
| | For the Applicant/Recipient | |
| I certify that the statements I have made on this fo knowingly false or misleading statement may be po with all applicable civil rights statutes and EPA reg | rm and all attachments thereto are true, accurate and complete. unishable by fine or imprisonment or both under applicable law. | I acknowledge that any I assure that I will fully comply |
| A. Signature of Authorized Official | B. Title of Authorized Official | C. Date |
| Ashley Ross | Director | 06/22/2018 |
| | | 10 E16 mm 20 4 |
| | | |
| | For the U.S. Environmental Protection Agency | |
| compliance information required by 40 C.F.R. Part | oplicant/recipient and hereby certify that the applicant/recipient had so a solution on the information submitted, this application applicant has given assurance that it will fully comply with all applicant has given assurance that it will fully comply with all applicant has given assurance that it will fully comply with all applicant has given assurance that it will fully comply with all applicant has given assurance that it will fully comply with all applicant. | on satisfies the preaward |
| A. *Signature of Authorized EPA Official | B. Title of Authorized Official | C. Date |
| | | · · |
| | 21 | |
| | | |
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| | | |
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| | | |
| | | ** |
| | | |

OMB Number: 4040-0007 Expiration Date: 01/31/2019

ASSURANCES - NON-CONSTRUCTION PROGRAMS

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0040), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

NOTE:

Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

- Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application.
- Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
- Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
- Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
- Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
- 6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C.§§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation

- Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U. S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee- 3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
- 7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
- 8. Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.

- Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements.
- 10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
- 11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
- Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.

- Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).
- 14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
- 15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
- Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
- Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
- Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.
- 19. Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

| SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL | TITLE |
|---|----------------|
| Ashley Ross | Director |
| APPLICANT ORGANIZATION | DATE SUBMITTED |
| Florida Fish & Wildlife Commission/ FWRI | 06/22/2018 |

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CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

| *APPLICANT'S ORGANIZATION Florida Fish & Wildlife Commission/ FWRI | |
|---|--|
| * PRINTED NAME AND TITLE OF AUTHORIZED REPRESENTATIVE Prefix: | |
| *SIGNATURE: Ashley Ross DATE: 06/22/2018 | |